

## REQUEST FOR QUOTES

### **APPLICATION PROPOSAL GUIDANCE**

ATTENTION BIDDER - New requirements. Prior to award of this solicitation your business must register as a bidder at [www.buyindiana.in.gov](http://www.buyindiana.in.gov). Just click on "Register your Business to do business with the State" Please be sure to complete the Buy Indiana certification page. It is preferred that businesses register immediately so that delay of solicitation award would not occur. This registration is maintained by you and you may update your information at any time. It remains in the database and covers all solicitation responses you submit to any state agency. It is very important that it be kept current. If you do not have access to a computer, you may call 317-234-0234 for assistance with your registration.

### **PURPOSE**

The purpose of this Request for Quotes (RFQ) is to solicit proposals from vendors interested in hiring a Parent Consultant who will assist the Early Hearing Detection and Intervention (EHDI) Program at the Indiana State Department of Health (ISDH) who will provide parent-to-parent support related to follow-up from Universal Newborn Hearing Screening (UNHS).

The vendor responsibilities will provide administrative supervision of the Parent Consultant, while the ISDH will provide technical supervision and support. The Parent Consultant will assist the EHDI Audiology Coordinator and UNHS Nurse Consultant by contacting parents who have children who have not received UNHS, who did not pass UNHS, or who have passed UNHS but are at risk for developing hearing loss after birth. In addition, the Parent Consultant will assist parents who have children with diagnosed hearing loss in receiving the educational, medical and family support necessary to enable children with hearing loss to reach their optimum potential.

### **OBJECTIVES**

Indiana State Department of Health, Maternal Child Health Services, Genomics and Newborn Screening, Early Hearing Detection and Intervention Program will engage in a two to three year process to improve parent-to-parent support in the EHDI Program. The following objectives have been established for the Parent Consultant including:

- Providing follow-up to families with infants who
  - Did not receive UNHS.
  - Did not pass UNHS.
  - Passed UNHS but are at risk for developing hearing loss after birth.
  - Have been diagnosed with hearing loss and need early intervention services.
- Using EHDI Alert Response System (EARS) to track interactions with families.
- Participating in education to consumers and professionals about the importance of UNHS and follow-up.
- Preparing reports related to educational sessions conducted.
- Answering questions related to the EHDI Program and available national, state, and local resources.
- Performing other related tasks as requested related to the EHDI Program.

The Universal Newborn Hearing Screening Grant awarded by the Health Resources and Services Administration has identified the following overall goals for Indiana's EHDI Program:

- To effectively and efficiently track and report the EHDI Program services.
- All newborns with potential hearing loss will be identified before 3 months of age for early treatment.
- All babies diagnosed with hearing loss will be enrolled in early intervention by six months of age.
- All babies who are at risk for delayed onset of hearing loss will be under the care of a pediatric audiologist and that results from evaluations are submitted to ISDH via the Diagnostic Audiology Evaluation form.
- All babies with hearing loss and those at risk for delayed onset of hearing loss will have a medical home.
- Children with diagnosed hearing loss will receive early intervention services from professionals skilled in working with deaf and hard of hearing children and their families.
- Parents will be involved in the everyday activities of Indiana's EHDI Program.

### **Evaluation**

Six priorities have been identified for the Parent Consultant with seven corresponding EHDI goals. Those involved in the development of this Parent Consultant position have reviewed the current national guidelines about the importance and effectiveness of having parent-to-parent support as a component in every day EHDI activities. The evaluation plan for this work effort will employ both qualitative and quantitative data collection and analysis procedures at multiple levels of accountability. Indicators have been identified for each of the priority objectives as well as the corresponding implementation strategies as measures of effectiveness. Most of this information is already collected to fulfill state and federal reporting requirements including: the Health and Resource Services Administration (HRSA), the Centers for Disease Control and Prevention (CDC), and the Directors of Speech and Hearing Programs in State Health and Welfare Agencies (DSHPSHA). Some of the questions that these data indicators will answer follow by level of accountability. Additional questions that emerge during the implementation phase will be addressed as determined appropriate by Early Hearing Detection and Intervention staff.

- Level 1. The discrete activities detailed in this plan will be monitored for completion and efficacy. Was the quality of support families received improved by this plan? Were the project activities completed on time? Were there any unforeseen influences that caused modifications to the plan? What were the positive and negative implications of those modifications? How could the implementation be improved?
- Level 2. The second level of evaluative activity will determine whether or not any Indiana families are better off as a result of the implementation of the Parent Consultant. Did the activities increase the number of babies receiving Universal Newborn Hearing Screening (UNHS)? Did the implementation of the Parent Consultant increase the number of parents involved in state and national parent support organizations? Did more children receive follow-up services? Did more children receive those follow-up services in a timely manner? Was the age identification of hearing loss reduced with the implementation of this project? Do more families have an identified medical home where they are covered by a public or private source of payment for their care? Are more families able to access the resources and supports they need when they need them? Are the number and percentage of children lost to follow-up reduced? Are families able to access timely information about hearing loss, communication options, educational options, and family support? Do random parent surveys indicate quality interactions with EHDI staff members?

## **PROJECT PERIOD/CONTRACT TERM**

ISDH expects the initial contract period for evaluation plan development to be from March 1, 2007 to June 30, 2007 with a second contract period of July 1, 2007 to June 30, 2008. The first contract period will entail hiring and beginning to implement the plan with the second period focusing on continued implementation and quarterly evaluations.

The principle staff person provided by the applicant for this project will serve as the primary contact with the ISDH Early Hearing Detection and Intervention Program and will be available by phone and in person to ISDH staff.

## **AVAILABLE FUNDS**

The source of funding is through a federal grant entitled Universal Newborn Hearing Screening through Health Resources and Services Administration Grant to ISDH. Applicants may apply for up to \$28,560 for the initial contract period.

## **TIMELINE**

The following timeline for this Contract Application Process (RFQ) is:

RFQ issued	October 18, 2006
Written questions due	October 25, 2006
ISDH responds to all written questions	October 30, 2006
Proposals Due	November 8, 2006
Telephone Interviews	November 13, 2006
Issue Notice of Award	November 15, 2006
Contract Negotiations	November 17, 2006
Executed Contract	March 1, 2007

- A. RFQ issued – October 18, 2006. ISDH will issue this RFQ to at least three vendors, and to any person or entity which requests.
- B. Written questions due- October 25, 2007. Written questions and comments related to the RFQ must be received by ISDH by 5:00 p.m. on October 25, 2006. These must be submitted to Robert Bruce Scott, MCSHC Grants Coordinator, Indiana State Department of Health, by electronic mail at [rbscott@isdh.in.gov](mailto:rbscott@isdh.in.gov) or by facsimile at (317) 233-1300. Oral questions will not be accepted.
- C. Response to written questions issued – October 30, 2006. ISDH will prepare written responses to all pertinent and properly submitted questions and will mail the responses to all persons and entities receiving the RFQ.
- D. Proposals due – November 8, 2006. Proposals must be received by 5:00 p.m. on November 8, 2006. Proposals may be submitted by electronic mail to the address referenced in (B) or by facsimile to the fax number referenced in (B). The signed application cover page may be mailed in after the due date.

- E. Telephone interviews – November 13, 2006. ISDH will arrange to speak by phone to selected applicants, if needed.
- F. Notice of Award – November 15, 2006. ISDH will offer the contract to the selected applicant by telephone. All other vendors will be notified by e-mail.
- G. Contract Negotiations will begin November 17, 2006.
- H. Executed Contract March 1, 2007.

### **SCOPE OF WORK**

ISDH Maternal Child Health Services will write a contract for services comprised of the following deliverables as the vendor's responsibilities:

1. To assist the EHDI Program with development of protocols for the evaluation of EHDI Parent Consultant;
2. To assist the EHDI Program with the development of a work plan that incorporates the evaluation components that are identified in the EHDI goals;
3. To assist the EHDI Program with implementation of the evaluation work plan.

### **QUALIFICATIONS**

The vendor must provide documentation of parent-to-parent support experience and capabilities. In addition, the vendor must hire a Parent Consultant who is a parent of a child with hearing loss. The vendor and the Parent Consultant would optimally have knowledge of the Early Hearing Detection and Intervention, Universal Newborn Hearing Screening, and Part C services are preferred.

### **EVALUATION OF THE PROPOSALS**

Proposals will be evaluated based on the following criteria:

1. Experience and qualifications of the applicant who will provide services.
2. The applicant's detailed plan to meet the requirements of each task activity required under "Scope of Work." Detailed plan shall include a timeline to meet requirements by February 23, 2007.
3. The applicant's past performance on projects of similar scope.
4. The overall ability of the applicant to successfully complete the project based on factors such as evidence of prior project management, availability of staff and knowledge and experience of staff.
5. Total cost

## **PROPOSAL FORMAT AND CONTENT**

These instructions describe the format and content of the proposal and are designed to facilitate a proposal that is easy to understand, review, and evaluate.

- A. Cover Page: State the name, address, tax identification number and the name of the director of the applicant; state the name, address, telephone and fax numbers and e-mail address of the applicant's representative to be contacted regarding this proposal. State amount of funds requested. Use Form A from this RFQ.
- B. Narrative: The main portion of the document should include the following individual sections. Although the overall narrative must not exceed eight (8) single spaced pages, there is no length limitation to the individual sections. Use either Arial or Times New Roman typeface in 12-point font and sequentially number the bottom of each page.
1. Describe the history of the organization.
  2. Identify projects in which the applicant is currently providing or has provided similar services described in this RFQ.
  3. Describe the involvement and experience of the applicant related to evaluation and data collection.
  4. Describe the person (s) who would perform duties related to the project. Include the number of people, their expertise and experience in providing these types of services.
  5. Provide detailed plan to meet the requirements of each task activity required under "Scope of Work." Detailed plan shall include a timeline to meet requirements by February 23, 2007.
  6. Describe the capacity of the applicant to provide any administrative support needed for this project.
  7. Identify established partnership relationships related to public health.
  8. Provide evidence of an Indiana business license.
  9. Identify the use, if any, of MBE/WBE certified firms as part of this application.
  10. Disclose if during the proceeding three (3) year period the applicant has: 1) defaulted on a contract and describe the incident; and 2) has terminated a contract prior to its completion or has had a contract terminated by the entity that issued the contract. Provide a brief description of each incident.

The following pages will not be included in the eight-page limit for the narrative section:

- C. Budget: Applicants can determine the total cost of the project in accordance with the following stipulations:
- Provide a line item budget and justification for each item. The budget may include: project staff salaries, travel costs, printing and copying, office supplies, materials for development of prototypes, and other direct project expenses.
  - Include in your proposed budget, your hourly rate (s) and the anticipated number of hours per deliverable.
  - The contract will be reimbursed by deliverables.
- D. Appendices: The applicant must include evidence of Indiana business license, organization chart, and curricula vitae for key personnel.

## **ISDH CONTACT PERSONS FOR THE REQUEST FOR QUOTES**

### **Primary contact:**

Robert Bruce Scott, Grants Coordinator, Maternal and Children's Special Health Care,  
317-233-1241, [rbscott@isdh.in.gov](mailto:rbscott@isdh.in.gov).

### **Secondary contact:**

Bob Bowman, MS, Director, Genomics and Newborn Screening, 317-233-1231, [bobbowman@isdh.IN.gov](mailto:bobbowman@isdh.IN.gov).

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MATERNAL AND CHILDREN'S SPECIAL HEALTH CARE  
APPLICATION

Federal I.D. # \_\_\_\_\_

FY 2006 MCH Amount Requested: \$ \_\_\_\_\_

Legal Agency /Organization Name: \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Project Director (type name) \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Signature of Project Director \_\_\_\_\_ Date \_\_\_\_\_

Agency CEO or Official Custodian of Funds  
(type name) \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Signature of person authorized to make legal  
And contractual agreement for the applicant agency \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Are you registered with the Secretary of State? ☐ Yes ☐ No

**INDIANA STATE DEPARTMENT OF HEALTH  
MATERNAL AND CHILDREN'S SPECIAL HEALTH CARE  
RFQ QUOTATION SCORING TOOL**

**Application Review Score:** \_\_\_\_\_

Applicant Agency: \_\_\_\_\_

Project Title: \_\_\_\_\_

Reviewer: \_\_\_\_\_

Date of Review: \_\_\_\_\_

<b>Experience and Qualifications 20 Points Maximum</b>	<b>Points Awarded</b>	<b>Comments</b>
1. Evaluate the applicant's experience and qualifications in conducting research and evaluation.		
2. Evaluate the applicant's experience in developing reports or plans with emphasis on early childhood development programs.		
3. Evaluate the applicant's experience in working with advisory committees.		

<b>Performance 20 Points Maximum</b>	<b>Points Awarded</b>	<b>Comments</b>
1. Does the applicant discuss previous evaluation activities, and report development?		
2. Does the applicant discuss past performance on projects of similar size and scope?		
3. Does the applicant include a detailed workplan that appears appropriate to the purposes of the RFQ?		

<b>Overall Abilities of Applicant 30 Points Maximum</b>	<b>Points Awarded</b>	<b>Comments</b>
1. Does the applicant demonstrate an understanding of exchanging information and incorporating peoples' ideas into project design?		
2. Does the applicant demonstrate an understanding of facilitating data collection?		
3. Does the applicant demonstrate an understanding of data analysis?		

<b>Budget 10 Points Maximum</b>	<b>Points Awarded</b>	<b>Comments</b>
1. Is the budget complete and are calculations correct?		
2. Does the budget adequately explain all line items in the budget?		
3. Is the budget reasonable in terms of overall project objectives?		